NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER: _____

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee Sm. Entry	Fee Lg. Entry	/	Total
		Sm./Lg.						
Basic Filing Fee	201/101				___	___	.	690.00
Total Claims >20	203/103	34 -20- 14		x	___	___	.	252.00
Independent Claims >3	202/102	6 -3- 3		x	___	___	.	234.00
Mult. Dep Claim Present	204/104				___	___	.	
Surcharge	205/105				___	___	.	130.00
English Translation	139							___

TOTAL FEE CALCULATION   1,306.00

Fees due upon filing the application.

Total Filing Fees Due = $ __1,306.00__

Less Filing Fees Submitted $ ___/___

BALANCE DUE   = $ __1,306.00__

B. Alexander
Office of Initial Patent Examination

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 29, 1999

CLAIMS AS FILED - PART I

	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE	▨▨▨▨	
TOTAL CLAIMS	34 minus 20=	* 14
INDEPENDENT CLAIMS	6 minus 3 =	* 3
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY TYPE ☐ OR OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
▨	345.00	OR	▨	690.00
X$ 9=		OR	X$18=	252.00
X39=		OR	X78=	234.00
+130=		OR	+260=	
TOTAL		OR	TOTAL	1,176.00

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* 34	Minus	** 34	= 0
Independent	* 6	Minus	*** 6	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.